FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZATION				
	(See instructions)	Office use only			
NAME OF COMMITTEE (in	full) (Check if name Example: If typying over the lines	ng, type 12FE4M5			
Legacy Politic	cal Fund				
ADDRESS (number and	Street) 325 North Saint Paul St				
(Check if add	Suite 3500				
is changed)	Dallas	TX 75201 - 1			
	CITY▲	STATE▲ ZIP CODE ▲			
committee's e-MA	egacyevents.org	1			
1					
	PAGE ADDRESS (URL)				
www.legacyp	oliticalfund.org				
COMMITTEE'S FAX 2142193233	NUMBER				
2. DATE M	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
3. FEC IDENTIFIC	ATION NUMBER C C00437376				
4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)					
I certify that I have exan	nined this Statement and to the best of my knowledge and belief it is tr	ue, correct and complete			
Type or Print Name or	Treasurer George E. Seay				
Signature of Treasure	r Electronically Filed by George E. Seay	Date 01 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
NOTE: Submission of fa	alse, erroneous, or incomplete information may subject the person sig				
Office Use Only					

FE3AN042.PDF

	FEC	Form 1 (Revised 12/2007)	Page 2
5.		COMMITTEE (Check One) Committee:	
	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.)	ne candidate
	Name of Candidate		
	Candidate Party Affilia	Office Sought: House Senate President	State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate		
	Party Com		
	(d)	(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	Political A	ction Committee (PAC):	
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
		Corporation Corporation w/o Capital Stock Lat	oor Organization
		Membership Organization Trade Association Co	poperative
	(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	I fund or party
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint Fund	raising Representative:	
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
	Co	mmittees Participating in Joint Fundraiser	
		1. FEC ID number C	
		2. FEC ID number	
		3. FEC ID number	
		4. FEC ID number C	
		FEC ID number	

2/2007)			Page 3	
ganization, Affiliated Committee, Lead	dership PAC Sponsor or Joir	nt Fundrais	ing Representative	
	<u> </u>			
CITY▲	STA	TE 🛦	ZIP CODE	
Affiliated Committee	Leadership PAC Sponsor	Joint	Fundraising Representative	
books and records.				
Suite 3500				
Dallas		<u>x</u> _	75201	
CITY A	STA Telephone number	TE & 	ZIP CODE 14 - 752 - 7245	
Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).				
e E. Seay				
325 North Saint Pa	ul St			
Suite 3500				
Dallas	<u>_</u>	<u>x</u> _	75201 –	
CITY 🛦	STA	ATE 🛦	ZIP CODE A	
	Telephone number	214	_ 752 _ 7245	
	ganization, Affiliated Committee, Lead CITY Affiliated Committee Pentify by name, address, (phone not books and records. E. Seay 325 North Saint Para Suite 3500 Dallas CITY A and address (phone number oper designated agent (e.g., assistant e.g., assistant e.g.) B. Seay 325 North Saint Para Suite 3500 Dallas Dallas	ganization, Affiliated Committee, Leadership PAC Sponsor or Join CITY STA CITY STA Affiliated Committee Leadership PAC Sponsor entify by name, address, (phone number optional), and possobooks and records. BE. Seay 325 North Saint Paul St Suite 3500 Dallas T. CITY STA Telephone number and address (phone number optional) of the treasurer of the designated agent (e.g., assistant treasurer). BE. Seay 325 North Saint Paul St Suite 3500 Dallas T. CITY STA STA STA CITY STA STA CITY STA STA CITY STA STA CITY STA	ganization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundrais CITY A STATE A Affiliated Committee Leadership PAC Sponsor Joint Fundrais entify by name, address, (phone number optional), and position of the books and records. B.E. Seay 325 North Saint Paul St Suite 3500 Dallas TX CITY A STATE A Telephone number 214 and address (phone number optional) of the treasurer of the commit of designated agent (e.g., assistant treasurer). B.E. Seay 325 North Saint Paul St Suite 3500 Dallas TX STATE A STATE A STATE A STATE A STATE A SUITE A STATE A	

FEC Form 1	(Revised 12/2007)		Page 4			
Full Name of Designated Agent	Steve Taylor					
Mailing Address	325 North Saint Paul St					
	Suite 3500					
	Dallas	TX	75201 –			
Title or Position ▼	CITY A	STATE A	ZIP CODE A			
A	ssistant Treasurer Telep	phone number 214				
safety deposit box	anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents afety deposit boxes or maintains funds. ame of Bank, Depository, etc. Wachovia					
Mailing Address	330 N Washington St					
	Alexandria		22314			
	CITY 🗖	STATE △	ZIP CODE 🛕			
Name of Bank, De	pository, etc.					
Mailing Address						
	CITY 🗖	STATE ⊿	ZIP CODE 🛕			